

**SPECIAL EVENT – CITY PROPERTY  
Event Information**

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NAME OF EVENT  
OR ORGANIZATION:

EVENT LOCATION:

DESCRIPTION OF EVENT:

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**EVENT TIMES**

DATE /TIME  
OF EVENT LIQUOR SALES:

DATE/TIME OF EVENT:

TIME OF EVENT SETUP:

TIME OF EVENT TEAR DOWN:

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**APPLICATION INFORMATION**

CITY LIQUOR LICENSE  
APPLICATION NO:

APPLICANT NAME:

ORGANIZATIONS & INDIVIDUAL  
RECEIVING PROCEEDS:

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**CITY SERVICES REQUIRED**

STREET CLOSURE: YES NO

STREET NAME:

CLOSURE TIME:

RE-OPEN TIME:

SECURITY:

CITY SANITATION SERVICES: YES NO

CITY WATER CONNECTION: YES NO

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**EVENT DETAILS**

LIVE MUSIC: YES NO

LIVE ENTERTAINMENT: YES NO

AMPLIFIED SOUND: YES NO

FOOD SALES: YES NO

ADDITIONAL INFORMATION: